11-16-00

PTO/SB/05 (12/97)

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## UTILITY **PATENT APPLICATION TRANSMITTAL**

TI-26605 Attorney Docket No. First Named Inventor or Application Identifier Robert T. Killian, et al. Apparatus and Method to Facilitate the Customization of **Television Content with Supplemental Data** 

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. EL547742083

	ICATION ELEME		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application								
4 Y Fee Transm	00 concerning utility patent nittal Form (e.g., PTO/SB/17 ginal, and a duplicate for fee pro	7)	6.		Microfiche	Washington, DC 20 Computer Program (A					
2. X Specification (preferred and	n rangement set forth below)	[Total Pages	20	<i>1</i> 7.		ם leotide and/o <i>oplicable, all</i>	r Amino Acid Sequence	Submission S			
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	nary of the Invention				c. Statement verifying identical of above copies						
- Brief Descri - Detailed De	ription of the Drawings (if file escription	ed)			ACCOMPANYING APPLICATION PARTS						
- Claim(s) - Abstract of	the Disclosure			8.	X	Assignme	nt Papers (cover sheet	& Documents(s))			
3. X Drawing(s) (3	35 USC d113)	[Total Sheets	3	<i>]</i> 9.			3.73(b) Statement re is an assignee)	X Power of Attorney			
Oath or Declaration		[Total Pages	2	<i>]</i> 10.		English To	ranslation Document (if				
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	[Note Box 5 below]			13.	X		eceipt Postcard (MPEP e specifically itemized)	503)			
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	see 37 CFR §1.63(d)(2			15.		Certified Copy of Priority Document(s) if foreign priority is claimed)					
The entire dis	By Reference (useable if B sclosure of the prior application	tion, from which a	copy of	16.		Other:					
	eclaration is supplied under the disclosure of the accom										
	porated by reference therein		whe	A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon.							
17. If a CONTINUING A	_			-	-			-	ent:		
☐Continuation ☐Divisional ☐Continuation-in-part (CIP) of prior application N  Prior application information: Examiner Group / Art Unit:									•		
		18. CORRE	SPOND	ENCE A	DDR				_		
X Customer Number or	Bar Code Label		94								
(Insert Customer No. or Attach bar code label here)  NAME Robert D. Marshall, Jr.											
ADDRESS											
COUNTRY	Ti	STATE   ELEPHONE	-5290	ZIP CODE   90 FAX   972-917-4418							
Name (Print/Type)		Marshall, Jr.	3200	Registration No. (Attorney/Agent)   28,527							
Signature			,			Date					
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## **TRANSMITTAL**

Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997

Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. EL547742083

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Complete If Known									
Application Number									
Filing Date	November 15, 2000								
First Named Inventor	Robert T. Killian, et al.								
Examiner Name									
Group / Art Unit									
Attorney Docket No.	TI-26605								

METHOD OF PAYMENT						FEE CALCULATION (continued)									
The Commissioner is hereby authorized to charge to the following Deposit Account,						3.	ADDIT	IONAL	. FEES			·			
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**or number previously paid, if greater, For Reissue, see below											examined (37	CFR 1.129(b))	,		
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over original patent SUBTOTAL (2) (\$) 0							*Reduced by Basic Filing Fee Paid SUBTOTAL (3)								
SUBMITTED BY											-		Complete (if appli	cable)	
	Typed or Printed Name Robert D. Marshall, Jr.												Reg. Number	28,527	
Signature Ashert & Mewhall M										oate er 15, 200	00	Deposit Account User ID	J		